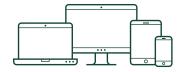


RISK TOLERANCE QUESTIONNAIRE-INDIVIDUALS

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DETERMINING RISK TOLERANCE

One of the important steps in formulating an investment plan is to identify your risk tolerance as an investor. It can depend on the goals you are investing toward, as well as your current age and personality. The less risk averse you are; the more your potential gain as well as your potential loss.OLT Risk Management has developed this questionnaire with the idea of gauging your risk appetite that conforms to your risk tolerance and expectations. Your investment style can range from conservative to aggressive, with each style having a specific risk tolerance. The purpose of this questionnaire is to help both of us to discover your risk tolerance and what are your investment objectives and the suitable instruments to achieve these goals. To make sure you are completely satisfied, we would therefore like to ask you for your kind cooperation in filling the questionnaire by yourself. We all know that the values of investments on capital markets fluctuate. This fluctuation (known as volatility) is influenced by market developments, economic factors, the behavior of other investors, as well as by the type of securities. It is very important for you as an investor or trader to understand the instruments you are trading as some of them can result in financial ruin In the questionnaire there are several questions related to your investment knowledge, experience, financial position, investment objectives, and your attitude to investment risk. Based on your answers, we will determine your investment profile reflecting what type of investor or trader you are. The questionnaire will also show whether you have the knowledge and experience needed to assess the risks of various types of financial products. By obtaining and subsequently evaluating the investment questionnaire's information, we also meet our statutory obligation in classifying our clients. The information helps us act in your best interest. For example, in practice this means that we will evaluate the appropriateness of transactions involving investment instrum

Client:

(first name, surname, academic title)

Signature:

Risk Tolerance Questionnaire

I- General Questionnaire (not scored)

Circle the response that best describes you. Remember that risk tolerance is largely subjective, so there is no right or wrong answer.

1. What is your current age?

a)	60 or Older	
b)	50 to 59	
c)	49 to 40	
d)	under 39	

2. Please provide some information on your net worth:

a)	below USD 100,000	
b)	below USD 500,000	
c)	below USD 1,000,000	
d)	above USD 1,000,000	

3. What is the source of your regular monthly income?

You can choose more than one answer

a)	Employment (employment income)Retirement pension, other pensions, allowances, social security benefits	
b)	Business activities	
c)	Income from property tenure (real estate lease, etc.)	
d)	Other	

4. Have you held any position related to financial instruments or requiring financial expertise over the past 5 years?

You can choose one answer

a)	Yes	
b)	No	

II- Investment Horizon Questions (Scored)



5. How long have you been associated with Capital Market?

a)	< 1 Year	
b)	1 to 2 Years	
c)	3 to 5 Years	
d)	> 5 Years	

6. What is your investment horizon?

a)	< 1 Year	
b)	1 to 2 Years	
c)	3 to 5 Years	
d)	> 5 Years	

7. How have you acquired your investment knowledge (investment services and trading, investment instruments etc.)?

a)	I have no investment knowledge	
b)	When investing my own money and/or as a self-learner	
c)	By studying at a specialized school or specialized course which included investment studies	
d)	In my past or present job or occupation, where my professional duties were directly related to investing	

III- Financial resources and risk tolerance Questions (Scored)

8. How much cash reserves (Savings) do you have?

a)	No Cash reserves	
b)	1 to 3 months cash reserves	
c)	4 to 6 months cash reserves	
d)	7 to 12 months cash reserves	
e)	More than a year of cash reserves	

9. Do you own any real estate?

Please choose one answer

a)	No, I do not	
b)	Yes worth no more than 500,000\$	
c)	Yes worth more than 500,000\$	

10. Suppose that in the past three months, the overall of your trading portfolio lost 25% of its value. What would you do?

a)	Sell all my shares	
b)	Sell some of my shares	
c)	Do nothing	
d)	Buy some shares	

11. Which of the following risks or events do you fear most?

a)	A loss of 10% principal over a period of 6 month or less	
b)	A loss of 10% principal over a period of 1 year	
c)	Investment performance that is consistently less than industry benchmarks	

d) A missed investment opportunity that could have yielded moderately higher returns over the long term, even though it entailed higher risk 📋



e)	A missed investment opportunity that could have yielded higher returns over the long term, even though it entailed substantial risk	
12.	What do you expect the average yearly return of your portfolio to be over your investment horizon?	
a)	0 to 5%	
b)	5 to 10%	
c)	10 to 15%	
d)	15 to 20%	
e)	More than 20%	
13.	What extent do your objective match with investing (trading) in Derivative market?	
a)	Risk Management	
b)	Hedging	
c)	Arbitrage	
d)	Speculation	
14.	How long have you been investing (trading) in Derivative Market?	
a)	zero	
b)	< 1 Year	
c)	1 to 2 Years	
d)	> 2 Years	
15.	What is the frequency of Trading in Derivative market – Financial Derivatives?	
a)	Never	
b)	Occasionally	
c)	Monthly	

 d)
 Weekly

 e)
 Daily

 Experience (since your first investment)

16. Financial instrument type	Product knowledge	Experience (since your first investment)			
		Date of first investment	Invested amount (USD)	Number of transactions	
Equities	□ Yes				
Bonds	□ Yes				
ETF	□ Yes				
Contract options	□ Yes				
Future	□ Yes				
Equity options	□ Yes				
CFDS	□ Yes				
Forex options	□ Yes				
Forex	Yes				

I hereby confirm that the information below was filled by me, that I have read it and that the information entered reflects my true risk appetite. I will inform the OLT Investment International Company BSC (c) promptly if a change occurs in my personal or financial situation that makes it necessary to change my answers. I have understood that in case my answers do not reflect my actual situation or if I fail to inform OLT Investment International Company BSC (c) of any change that occurs in my personal or financial situation, I might be exposed to risks exceeding my risk tolerance or my financial capabilities.

Date:

Client Name:.....

Signature:



Interpretation of Results

Client Classification	Type of Product
Retail	Equities, Bonds & ETF
Expert	Options, Futures, CFDs (Excluding CFDs on Currencies)
Accredited	All products

FOR INTERNAL USE ONLY

Risk Tolerance Question	nnaire			
Client Name:			 	
Client Classification:			 	
Date Checked:	/	/		
Remarks:			 	